

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000096737

1. Entity Name
THE SEAL COMPANY



Principal Place of Business
3732 NW 16TH ST.
FT. LAUDERDALE, FL 33312

Mailing Address
3732 NW 16TH ST.
FT. LAUDERDALE, FL 33312

FILED
05 APR 29 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04262005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0629229

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FILINGS, INC.
3732 NW 16TH ST.
FT. LAUDERDALE, FL 33312

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

100054126701
05/10/05--01010--020 **150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HEYMAN, LESLIE
STREET ADDRESS	3732 NW 16TH ST.
CITY-ST-ZIP	FT. LAUDERDALE, FL 33311
TITLE	D
NAME	HEYMAN, BONNIE
STREET ADDRESS	3732 NW 16TH ST.
CITY-ST-ZIP	FT. LAUDERDALE, FL 33311
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #